

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 12 OF 25  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee  
Planned Parenthood Action Fund of Santa Barbara,  
Ventura and San Luis Obispo Counties

Mailing Address

518 Garden Street

City State Zip Code

Santa Barbara , CA 93101

Purpose of Expenditure

Phone Banking

Category/  
Type 004

Date

10 / 31 / 2012

Amount

95.60

Office Sought: ☒ House State: CA  
☐ Senate District: 24  
☐ President

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Calendar Year-To-Date Per Election  
for Office Sought 9,882.41

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Square One Consulting, LLC

Mailing Address

1382 Berkeley Ave.

City State Zip Code

St. Paul , MN 55105

Purpose of Expenditure

Minutes for Phone Banking

Category/  
Type 004

Date

10 / 31 / 2012

Amount

63.15

Office Sought: ☒ House State: CA  
☐ Senate District: 24  
☐ President

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Calendar Year-To-Date Per Election  
for Office Sought 9,882.41

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Planned Parenthood Action Fund of Santa Barbara,  
Ventura and San Luis Obispo Counties

Mailing Address

518 Garden Street

City State Zip Code

Santa Barbara , CA 93101

Purpose of Expenditure

Phone Banking

Category/  
Type 004

Date

11 / 01 / 2012

Amount

74.45

Office Sought: ☒ House State: CA  
☐ Senate District: 26  
☐ President

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Julia Brownley

Calendar Year-To-Date Per Election  
for Office Sought 10,385.97

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures .....

233.20

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....  
(carry total from last page forward to Line 7)

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